

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-------------|------------|----------------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | <i>SW</i> | <i>32</i> | <i>2/1</i> |
| FORMALITY REVIEW | <i>1/11</i> | <i>657</i> | <i>2/28/01</i> |
| RESPONSE FORMALITY REVIEW | <i>1/11</i> | <i>657</i> | <i>6/12/01</i> |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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Best Available Copy